

| <i>Issue Classification</i> | Application No. | Applicant(s) |
|--|------------------------|---------------------|
|  | 10/084,714 | SLUIJTER ET AL. |
| Examiner | Art Unit | |
| Susan McFadden | 2655 | |

| <input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant | | <input type="checkbox"/> CPA | | <input type="checkbox"/> T.D. | | <input type="checkbox"/> R.1.47 | |
|---|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | 31 | 31 | 61 | 61 | 91 | 91 |
| 2 | 2 | 32 | 32 | 62 | 62 | 92 | 92 |
| 3 | 3 | 33 | 33 | 63 | 63 | 93 | 93 |
| 4 | 4 | 34 | 34 | 64 | 64 | 94 | 94 |
| 5 | 5 | 35 | 35 | 65 | 65 | 95 | 95 |
| 6 | 6 | 36 | 36 | 66 | 66 | 96 | 96 |
| 7 | 7 | 37 | 37 | 67 | 67 | 97 | 97 |
| 8 | 8 | 38 | 38 | 68 | 68 | 98 | 98 |
| 9 | 9 | 39 | 39 | 69 | 69 | 99 | 99 |
| 10 | 10 | 40 | 40 | 70 | 70 | 100 | 100 |
| 11 | 11 | 41 | 41 | 71 | 71 | 101 | 101 |
| 12 | 12 | 42 | 42 | 72 | 72 | 102 | 102 |
| 13 | 13 | 43 | 43 | 73 | 73 | 103 | 103 |
| 1 | 14 | 44 | 44 | 74 | 74 | 104 | 104 |
| 2 | 15 | 45 | 45 | 75 | 75 | 105 | 105 |
| 3 | 16 | 46 | 46 | 76 | 76 | 106 | 106 |
| 4 | 17 | 47 | 47 | 77 | 77 | 107 | 107 |
| 5 | 18 | 48 | 48 | 78 | 78 | 108 | 108 |
| 6 | 19 | 49 | 49 | 79 | 79 | 109 | 109 |
| 20 | 20 | 50 | 50 | 80 | 80 | 110 | 110 |
| 21 | 21 | 51 | 51 | 81 | 81 | 111 | 111 |
| 22 | 22 | 52 | 52 | 82 | 82 | 112 | 112 |
| 23 | 23 | 53 | 53 | 83 | 83 | 113 | 113 |
| 24 | 24 | 54 | 54 | 84 | 84 | 114 | 114 |
| 25 | 25 | 55 | 55 | 85 | 85 | 115 | 115 |
| 26 | 26 | 56 | 56 | 86 | 86 | 116 | 116 |
| 27 | 27 | 57 | 57 | 87 | 87 | 117 | 117 |
| 28 | 28 | 58 | 58 | 88 | 88 | 118 | 118 |
| 29 | 29 | 59 | 59 | 89 | 89 | 119 | 119 |
| 30 | 30 | 60 | 60 | 90 | 90 | 120 | 120 |